## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| Application or Docket Number |   |
|------------------------------|---|
| Application or Docket Number | 4 |
| , , , ,                      | • |
| 0984274                      |   |

| CLAIMS AS FILED - PART I  |                                       |   |                |                               |              |                          |          | SMALL ENTITY       |                        |        | OTHER THAN          |                        |  |
|---|---------------------------------------|---|----------------|-------------------------------|--------------|--------------------------|----------|--------------------|------------------------|--------|---------------------|------------------------|--|
| TOTAL CLAUSE  |                                       |   | (Column 1)     |                               | (Colu        | (Column 2)               |          | TYPE               |                        | OR     | SMALL ENTITY        |                        |  |
| 10  | TAL CLAIMS                            |   | .31            |                               | ;<br>:       | ,<br>                    |          | RATE               | FEE                    | ]      | RATE                | FEE                    |  |
| FOR   |                                       |   | NUMBER FILED   |                               | NUMB         | BER EXTRA                |          | BASIC FEE          | 355.00                 | OR     | BASIC FEE           | 710.00                 |  |
| TC  | TAL CHARGEA                           | BLE CLAIMS                                | 3/ / minus 20= |                               | • 11         |                          |          | X\$ 9=             |                        | OR     | X\$18=              | 198                    |  |
| <b>—</b>  | DEPENDENT CL                          |   | 1 10 -         | nus 3 =                       | 3            |                          |          | X40=               |                        | OR     | X80=                | 240                    |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                                       |   |                |                               |              |                          |          | +135=              |                        | OR     | +270=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2                              |                                       |   |                |                               |              |                          | _        | TOTAL              |                        | OR     | TOTAL               | 1,148                  |  |
| CLAIMS AS AMENDED - PART II   |                                       |   |                |                               |              |                          |          |                    |                        | -      | OTHER               | THAN                   |  |
| (Column 1) (Column 2) (Column 3)  |                                       |   |                |                               |              |                          |          | SMALL              | ENTITY                 | OR     | SMALL               | ENTITY                 |  |
| AMENDMENT A   | B ( )                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA         |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NON   | Total                                 | . 3/                                      | Minus          | 3                             | 1            | = /                      |          | X\$ 9=             |                        | OR     | X\$18=              |                        |  |
| AME   | Independent                           | • 6<br>NTATION OF MI                      | Minus          | PENDENT                       | CLAIM        | = _                      |          | X40=               |                        | OR     | X80=                |                        |  |
| _   |                                       |   | Je. 11 22 02,  | E TO E TO                     | 02,414       |                          |          | +135=              |                        | OR     | +270=               |                        |  |
|   |                                       |   |                |                               |              |                          | ΑĪ       | TOTAL<br>ODIT. FEE |                        | OR     | TOTAL<br>ADDIT, FEE |                        |  |
| (Column 1) (Column 2) (Column 3)  |                                       |   |                |                               |              |                          |          |                    |                        |        |                     |                        |  |
| AMENDMENT B   |                                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA         |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Š   | Total                                 | •   | Minus          | ••                            |              | =                        |          | X\$ 9=             |                        | OR     | X\$18=              |                        |  |
| AME   | Independent                           | •   | Minus          | ***                           |              | =                        |          | X40=               |                        | OR     | X80=                |                        |  |
| L   | HHS! PRESE                            | NTATION OF M                              | JLTIPLE DEF    | PENDENT                       | CLAIM        |                          | ¹   ¯    | +135≔              |                        | OR     | +270=               |                        |  |
|   |                                       |   |                |                               |              |                          | L        | TOTAL              |                        |        | TOTAL               |                        |  |
|   | ADUIT, FEE ADUIT, FEE                 |   |                |                               |              |                          |          |                    |                        |        |                     |                        |  |
| _   | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | (Column 1)                                | ibc .          | (Colur<br>HIGH                |              | (Column 3)               | 1 _      |                    |                        | 1      |                     |                        |  |
| AMENDMENT C   |                                       | REMAINING<br>AFTER<br>AMENDMENT           |                | PREVIO<br>PAID                | BER<br>DUSLY | PRESENT<br>EXTRA         |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NON   | Total                                 | •   | Minus          | **                            |              | =                        |          | X\$ 9=             |                        | OR     | X\$18=              |                        |  |
| AME   | <b>Inde</b> pe <b>nde</b> nt          | •   | Minus          | ***                           | ,            | =                        | <b> </b> | X40=               |                        | OR     | X80=                |                        |  |
|   | FIRST PRESE                           | NTATION OF M                              | J ├            |                               |              | On                       |          |                    |                        |        |                     |                        |  |
| +135= OR +270=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                       |   |                |                               |              |                          |          |                    |                        |        |                     |                        |  |
| **  | If the "Highest Nu                    | mber Previously Pa                        | aid For IN THI | S SPACE I                     | s less tha   | n 20, enter <b>"2</b> 0. | - AD     | TOTAL<br>DIT. FEE  |                        | OR     | TOTAL<br>ADDIT, FEE |                        |  |
|   |                                       | nber Previously Pa                        |                |                               |              |                          | er found | d in the app       | ropriate box           | in col | umn 1,              |                        |  |